

Name
in
Full

Robert Adams

CERTIFICATE OF DEATH

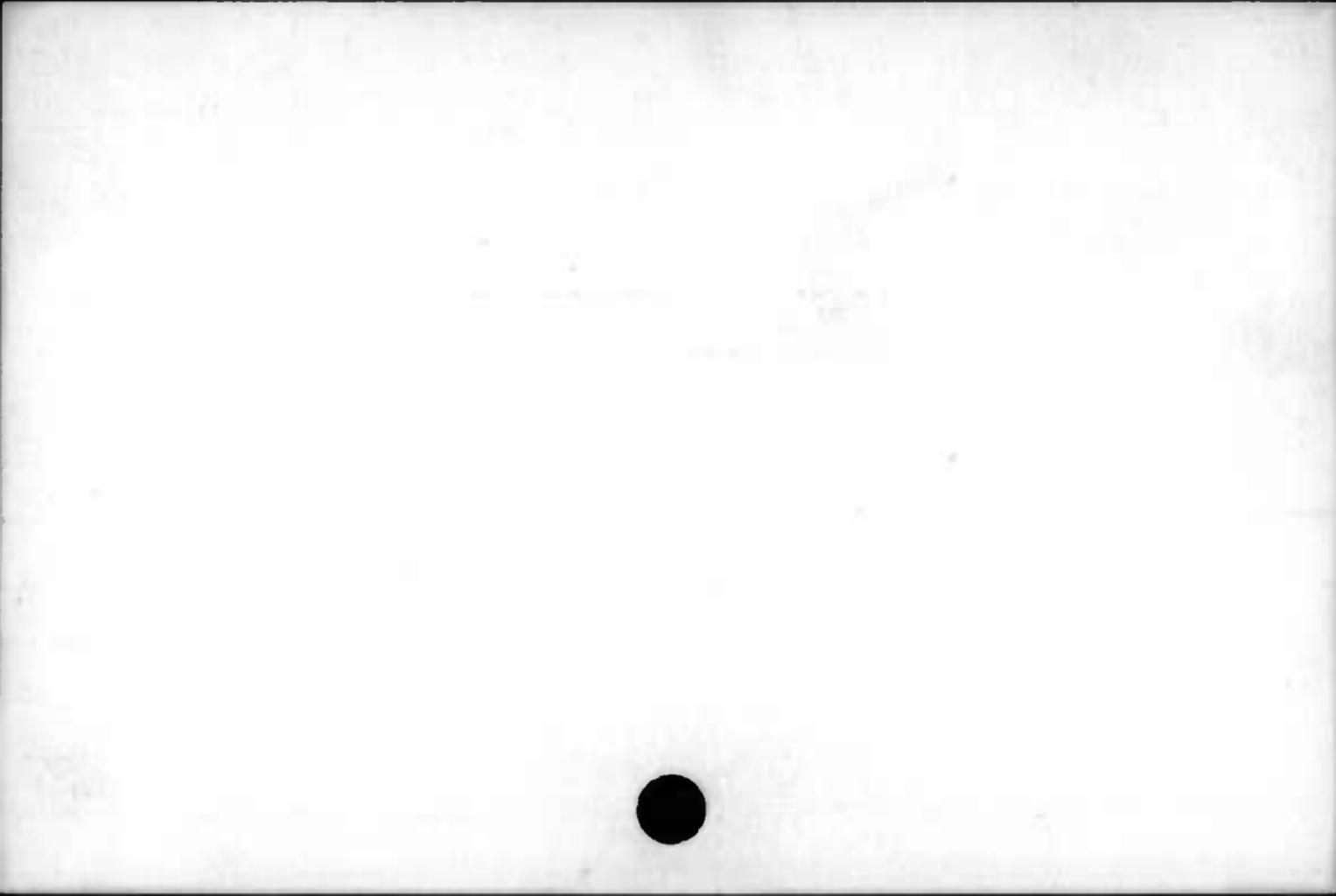
To BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND
Date of death	Month	Years	Months Days
1903	July	16	1
Sex	Color or Race	Birth-place	
Male	Blk	Talbot Co., Md	
Occupation	Where Residing if not at place of death		
Single	Talbot Co., Md		
Married, Single or Widowed	Name of Wife or Husband		
Single			
Father's Name	Morris Adams		
Mother's Maiden Name	Rebecca Bowes		
Name of person giving information	Perry Adams 27		
Father's Birthplace			
Talbot Co., Md			
Mother's Birthplace			
Caroline Co., Md			
How related to deceased			
Brother			

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Resident in County of Talbot Co., Md	How long	6 mos
Immediate	Hert Failure	How long	24 hours
Are the name, age, sex, color, date and place correctly given above?		Signature of Physician	Miss Elizabeth
		Address	Euryng Md
Accident or Suicide?			



Mildred Bawton.

Town

oxford

County

Talbot

Died at

MARYLAND

Date 1963

July 6

Month Day

Y. M. D.

Native of

Occupation

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

Dan'l. H. Bawton

Mother's

Maiden Name

Annie D. Miles

Cause of

Primary

Anested development

How long sick

all life

Death

Immediate

Exhaustion from disease

Accident, Suicide, Homicide

Reported by

J. A. Stevens

Address

Oxford, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

TO BE ANSWERED BY
NEAREST FRIEND

James Henry Penner

CERTIFICATE OF DEATH

Died at		Town	County		MARYLAND						
Died at		Oxford	Talbot								
Date of death	1903	Month	July	Day	13	Years	71	Months	8	Days	28
Sex	Male	Color or Race	White		Birth-place	near Oxford					
Married, Single or Widowed	Widower		Occupation	Retired							
Name of Wife or Husband											
Father's Name	Edward Penner		Father's Birthplace								
Mother's Maiden Name	Nancy		Mother's Birthplace								
Name of person giving Information	Maurice S. Penner		How related to deceased	Son							

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary

Symptomatic Peritonitis

How long

Five days

immediate

Septicemia

How long

Two days

Are the name, age, sex, color, date and place correctly given above?

yes

Signature of Physician

Address

J. A. Slivens

Oxford

Md.

Accident or Suicide?

no



Name
in
Full

Dorothy Carter

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND		
Died at	Cordova	Talbot			
Date of death 1903	Month July	Day 24	Years	Months	Days
Sex Female	Color or Race	White	Age	4	9
Married, Single or Widowed	Single		Occupation	X	
Name of Wife or Husband	X				
Father's Name	L. M. R. Carter -		Father's Birthplace	Delaware	
Mother's Maiden Name	Mary Merrick -		Mother's Birthplace	Maryland	
Name of person giving Information	11	11	How related to deceased	Mother	

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary *b1* How long

Immediate *Meningitis Acute* How long *4 days*

Are the name, age, sex, color, date and place correctly given above?

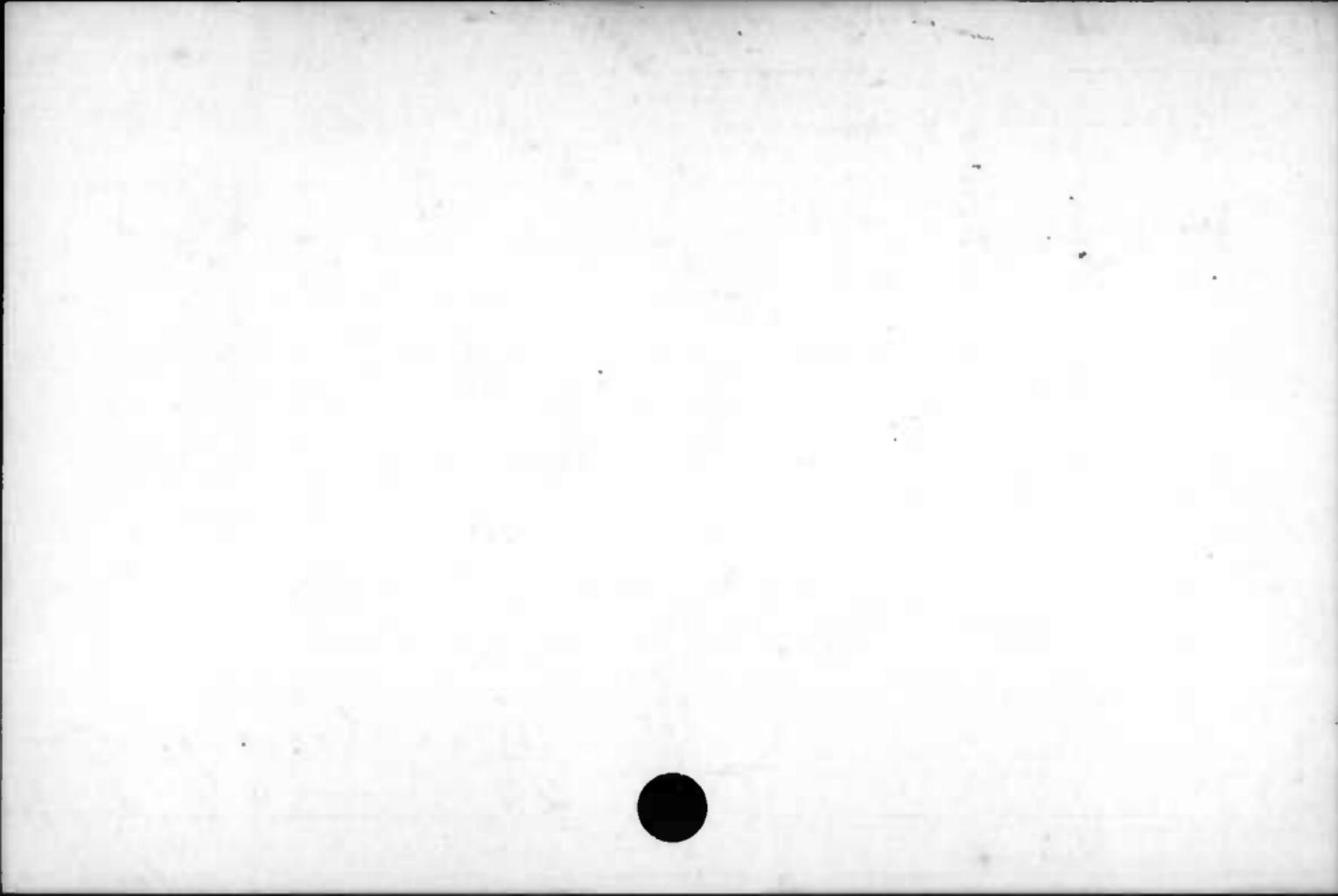
yes

Signature of Physician

Address

Chas. H. Rose
Cordova

Accident or Suicide? X



Name
in
Full

TO BE ANSWERED BY
NEAREST FRIEND

Harriet C. Cook

Town

County

CERTIFICATE OF DEATH

MARYLAND

Died at Belvieu

Talbot

Date of death 190

Month

Day

Years

Months

Days

3

July

now

Age

Sex

Female

Color or Race

Negro

Birth-place

Belvieu

Married, Single or Widowed

Occupation

Name of Wife or Husband

Father's Name

Lem Cook

Father's Birthplace

Belvieu

Mother's Maiden Name

Elma Green

Mother's Birthplace

Belvieu

Name of person giving information

Lem Cook

How related to deceased

Father

CAUSES OF DEATH

Primary

Severe Diarrhoeal
Convulsion, 105

How long

5 Days.

Immediate

How long

High time

Are the name, age, sex, color, date and place correctly given above?

Yes.

Signature of Physician

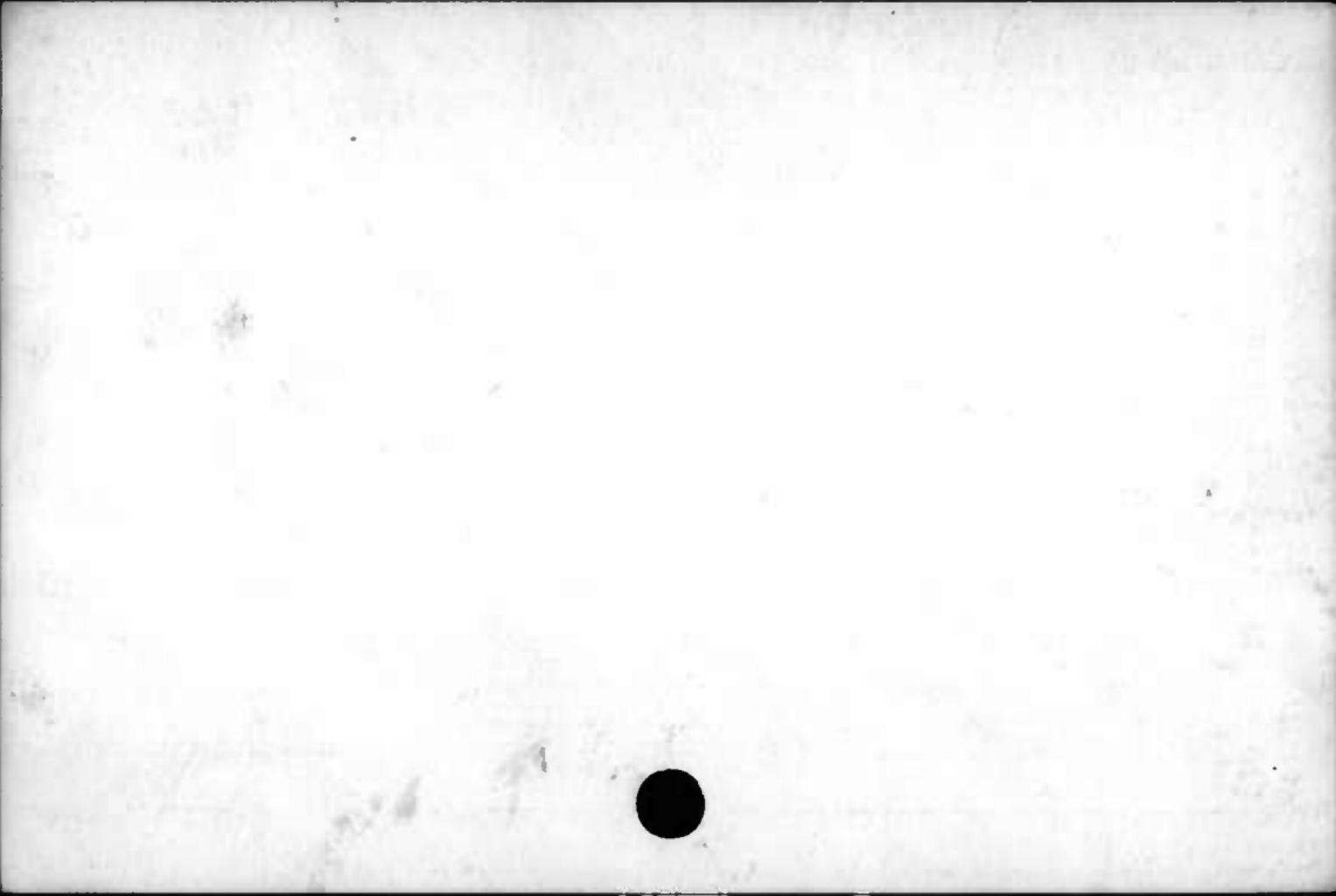
J.W. Eader, M.D.

Address

St Michaels Md.

Accident or Suicide?

PHYSICIAN
OR CORONER



Alaniel W. Cummings

Died at	Town Marlboro	County Calvert - MARYLAND
Date 19	Month 03	Day 7-10
Male	Age Married	Native of Md
Female	White Colored	Occupation Child
Single		Divorced
Number of children living		

Husband of

Wife

Father

Name

Cause of Primary

Death Immediate

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



James Nicholas Cummings

Town County

Died at Belgravia

County

MARYLAND

Date 1903

Month Day

Y. M. D.

Native of

Occupation

7 - 22

Age 49-11-3

Talbot

Merchant

Male

Female

White

Colored

Married

Single

Widow

Widower

Divorced

Number of children living

Husband

Wife

of Elizabeth Encilla

Mother's

Name Nicholas Cummings

Name

Mary Ann

Cause of

Primary

Scirrhosus Multiplex

How long sick

20 months

Death

Immediate

Cardiac Failure

Accident, Suicide, Homicide

Reported by

W.W. Chaires, M.D.

W.W.

Address

Belgravia, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Nora Gaucon

Died near Easton

County

Talbot

MARYLAND

Date 1903, July 5

Month Day

Y. M. D.

Native of

Age

1- 2 0

U.S.A.

Occupation

Baby

Male

White

Married

Widow

Divorced

Female

Color

Single

Widower

Number of children living

Husband of _____

Wife

Father's Name

Wm B. Gaucon

Mother's Maiden Name

Nora Lynch

Cause of Death

Primary

Cholera Infantum

How long sick

1 mo

Immediate

Exhaustion

105

Accident, Suicide, Homicide

Reported by

Chas. F. Davidson

Easton, Md.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Charlotte Annie Hambleton

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at St. Michaels		Town Town		County Calbot		MARYLAND	
Date of death 1903	Month 7	Day 9	Age 56	Years 56	Months —	Days —	
Sex Female	Color or Race white	Occupation widow		Birth-place St. Michaels Md			
Married, Single or Widowed							
Name of Wife or Husband	William Henry Hambleton						
Father's Name	Josiah Fairbank		Father's Birthplace		do not know		
Mother's Maiden Name	Mary Ann merchant		Mother's Birthplace		St. Michaels Me		
Name of person giving information	Chas. Hambleton		How related to deceased		Son		

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary

Chronic Gastritis and Chronic Rheumatism

How long

3 yrs

Immediate

Dysentery and Aetheria

How long

one week

Are the name, age, sex, color, date and place correctly given above?

yes

Signature of Physician

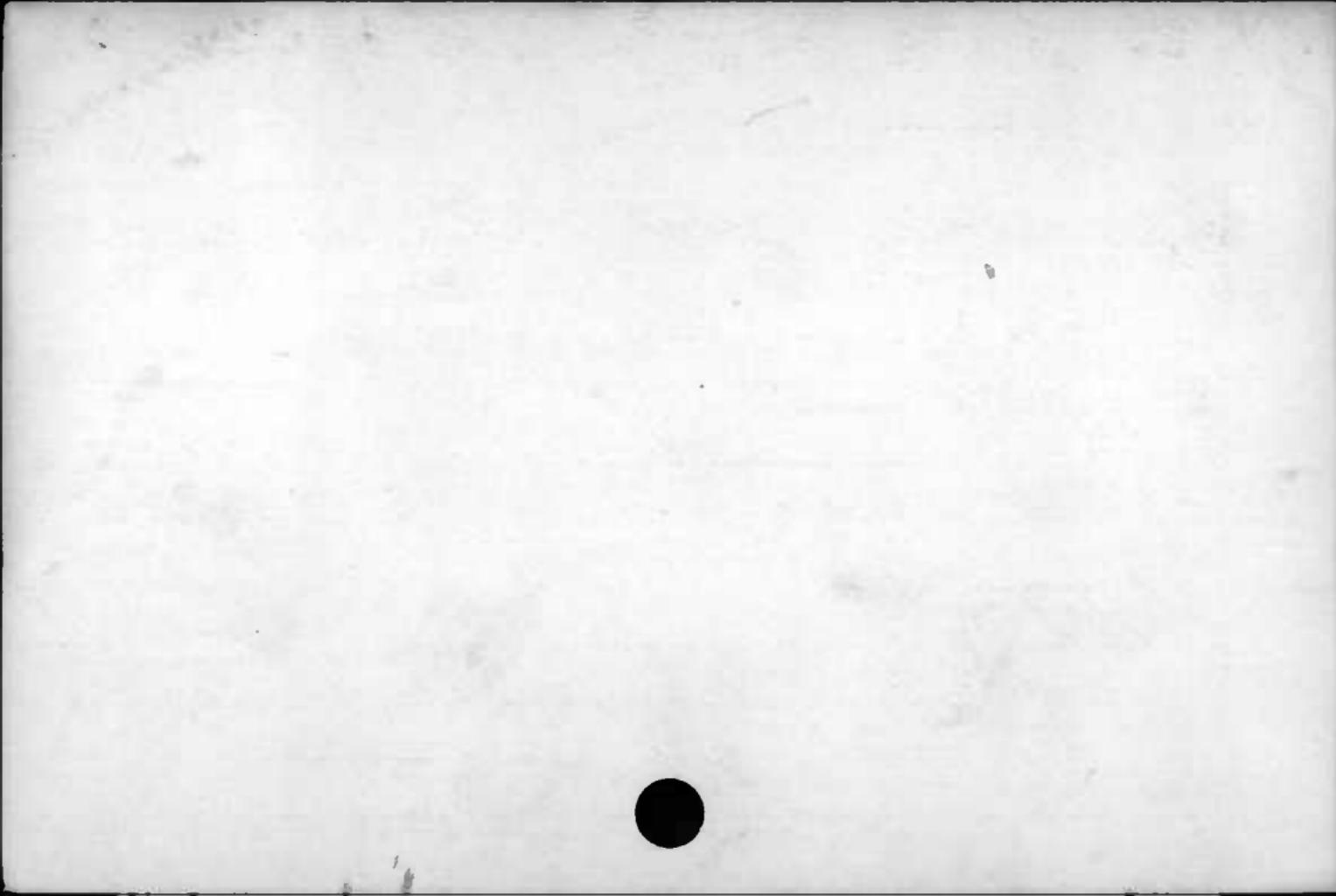
A. B. Glasecock

Address

St. Michaels Md

Accident or Suicide?

14



Name
in
Full

TO BE ANSWERED BY
NEAREST FRIEND

Harold A Haskins				CERTIFICATE OF DEATH		
Died at	Town St. Michaels	County Talbot				
Date of death 190	Month 3 July	Day 6th	Age 7	Years	Months 9	Days —
Sex Male	Color or Race Colored	Occupation Boys	Birth- place St. Michaels			
Married, Single or Widowed Single						
Name of Wife or Husband						
Father's Name William Haskins				Father's Birthplace St. Michaels		
Mother's Maiden Name Rebecca More				Mother's Birthplace St. Michaels		
Name of person giving Information William Haskins				How related to deceased Father		

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary

Consumption 27

How long

18 months

Immediate

Heart Failure

How long

Are the name, age, sex, color, date
and place correctly given above?

yes

Signature of
Physician

dr. J. B. Syli

Address

**St. Michaels
Md**

Accident or Suicide?



Name in Full

Certificate of Death

Mary Hubbard

Died at Easton Town Talbot County MARYLAND

Date 19	Month	Day	Y. M. D.	Native of	Occupation
1903	Aug	30	96-30	Caroline Co. Maryland	Housewife
<u>Male</u>		<u>White</u>	<u>Married</u>	<u>Widow</u>	<u>Number of children living</u>
<u>Female</u>		<u>Colored</u>	<u>Single</u>	<u>Widow</u>	9

Husband of	Samuel Hubbard		
Wife			
Father's Name	John Remmey	Mother's Maiden Name	Martha Blades
Cause of Death	Primary	Age	100
	Immediate	How long sick	3 months
		Accident, Suicide, Homicide	

Reported by

J. S. Gamm, M.D.

Address

Must be signed by physician, if any in attendance, otherwise by minister, undertaker or minister.



Annie E. Jackson

Town

St Michaels

County

Salisbury

MARYLAND

Died at

Y. M. D.

Native of

Occupation

Date 1903

Month Day

Age

67 - -

St Michaels

Housework

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

5~

Husband of

Wife

Father's

Name

Mother's

Maiden Name

103

Cause of

Primary

Ulcer of Stomach

How long sick

15 months

Death

Immediate

Asthenia

Accident, Suicide, Homicide

Reported by

A. B. Glaserch
St Michaels
Md

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Roy W. Jackson

Died at	St. Michaels	Town	Calvert	County	MARYLAND
Date 19	03	Month	July	Day	
Male	White	Age	1	Y. M. D.	Native of
Female	Colored	Married	25	1900	Occupation
		Single			Child
					Divorced
					Number of children living

Husband of

Wife

Father's Name

Cause of Death

Primary

Immediate

Reported by

Dr. F. B. Seth

Address

St. Michaels Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

TO BE ANSWERED BY
NEAREST FRIEND

PHYSICIAN
OR CORONER

John. Grump

Town

Talbot -
County

CERTIFICATE OF DEATH

MARYLAND

Died at

Melthaus

Date
of death

1903

Month

7

Day

29

Years

58

Months

7

Days

9

Sex

Male

Color or
Race

White

Birth-
place

Delaware

Married, Single
or Widowed

Occupation

Merchant

Name of Wife or
Husband

Jennie Ridgely

Father's
Name

Edwin P. Grump

Father's
Birthplace

Caroline Co

Mother's
Maiden Name

Elizabeth Lewis

Mother's
Birthplace

Delaware

Name of person giving
Information

Mrs. Thomas Barwick

How related
to deceased

Daughter

CAUSES OF DEATH

Primary

Fatty degeneration of heart.

How long

10 yrs or more

Immediate

Cerebral anemia

79

How long

2 weeks

Are the name, age, sex, color, date
and place correctly given above?

Yes

Signature of
Physician

C. M. Stelle M. D.

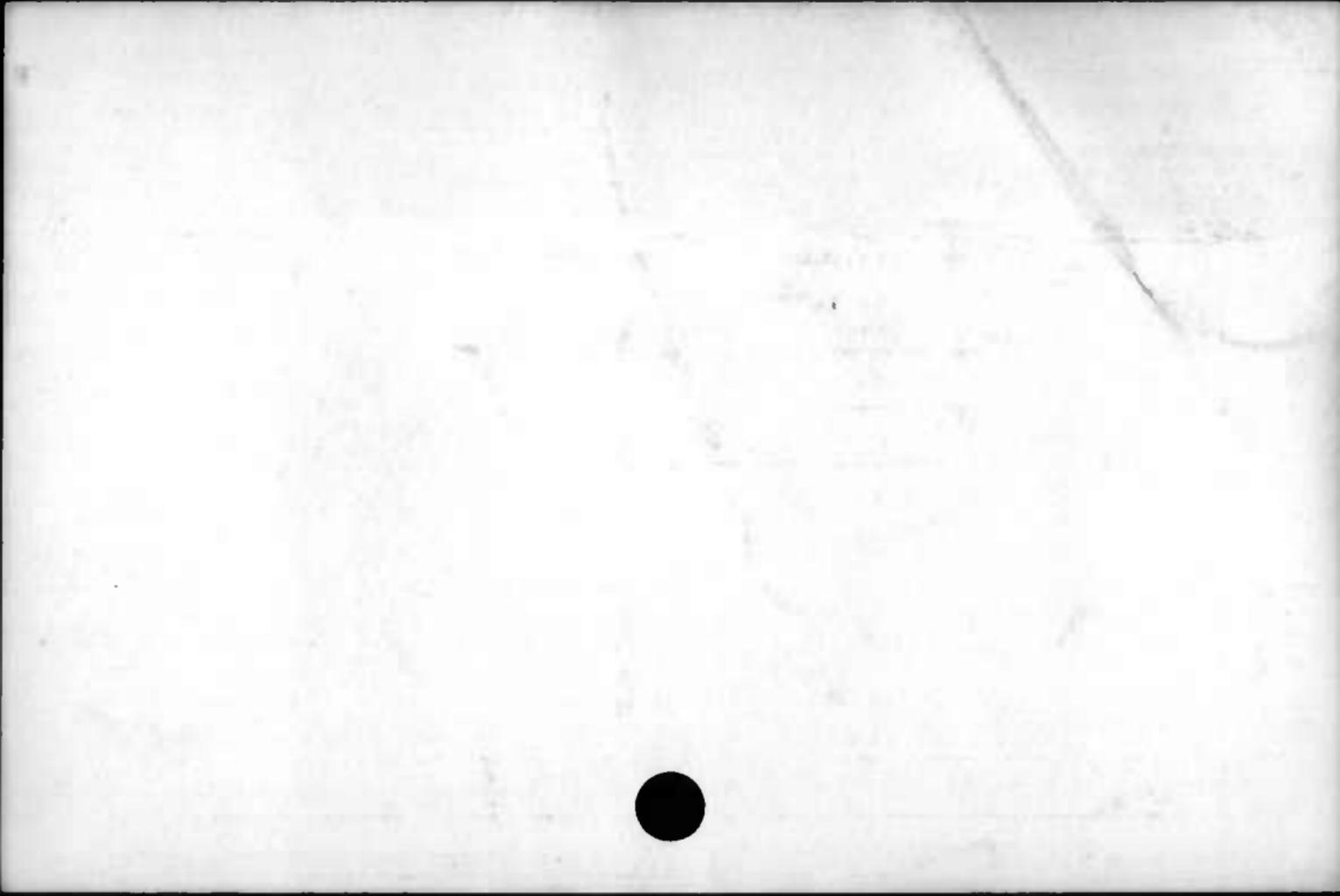
Address

Cordova

Md.

Accident or Suicide?

No



Name
in
Full

Sarah J. Jumps

CERTIFICATE OF DEATH

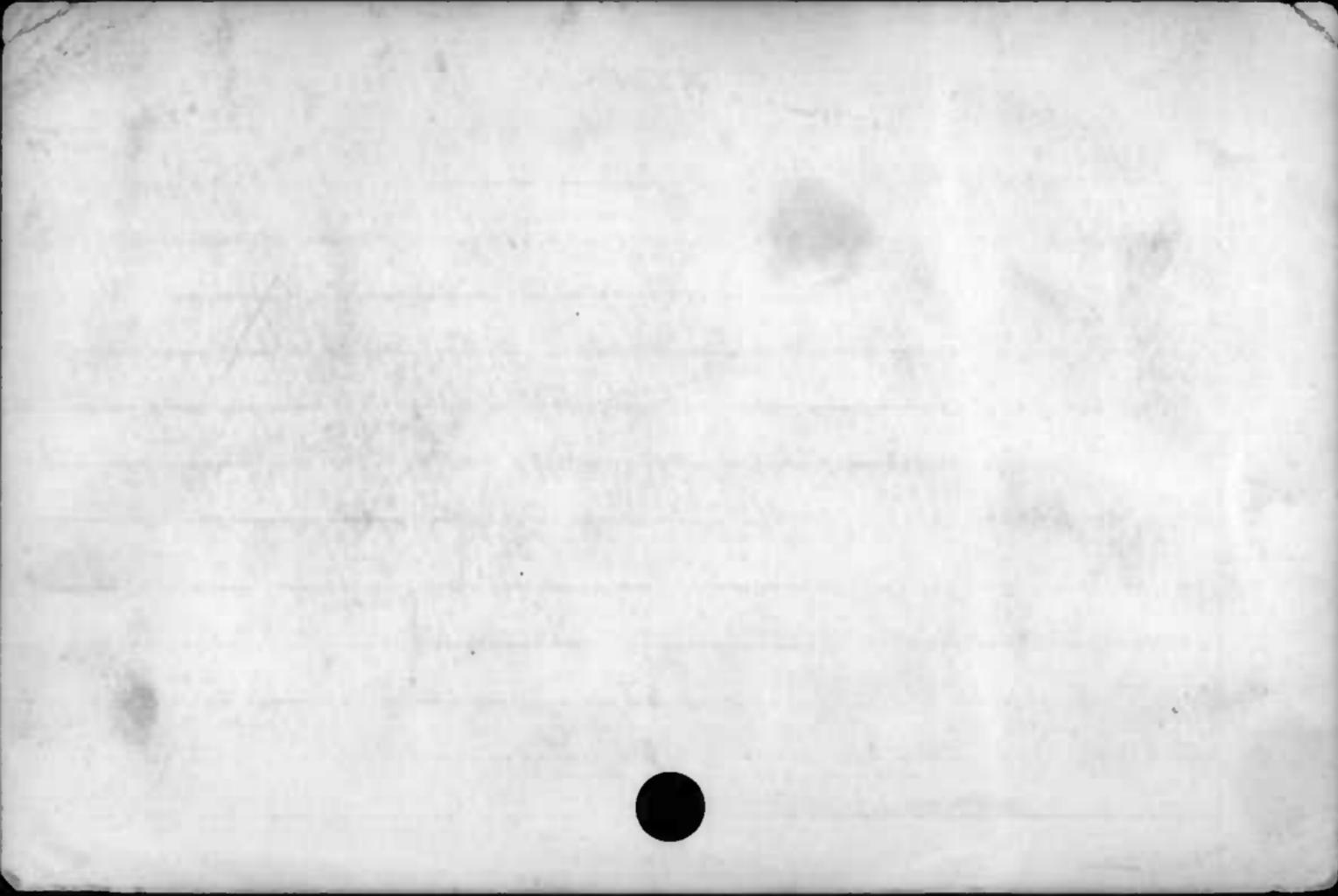
To BE ANSWERED BY
NEAREST FRIEND

Died at Clarionne		Town Salisbury		County		MARYLAND	
Date of death 1903	Month July	Day 19	Age 73	Years .	Months .	Days .	Days .
Sex Female	Color or Race white	Occupation widow		Birth- place Kent Island Md			
Married, Single or Widowed	Name of Wife or Husband Jno Henry Jumps		Father's Name Jno Cockey		Father's Birthplace Kent Is Md		
Mother's Maiden Name Hermeline Bryan	Name of person giving Information Jno Cockey		Mother's Birthplace Kent Is Md		How related to deceased Brother		

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary Paralysis Agitans	How long several years
Immediate Dysentery	How long one week
Are the name, age, sex, color, date and place correctly given above? yes	Signature of Physician A.B. Glascock
	Address St. Michaels Md
Accident or Suicide? L	



Emily Kirby.

Died at		Town <u>Trappe</u>	County <u>Talbot</u>	Native of <u>Maryland</u>			
Date	1903	Month <u>July</u>	Day <u>1</u>	Y. <u>32</u>	M. <u>6</u>	D. <u>15</u>	Occupation <u>Housewife</u>
Male		White	Married	Widow		Divorced	
Female		Colored	Singla	Widower		Number of children living	
Husband							
Wife							
Father's Name		Wm. A. Kirby	Mother's Maiden Name		Margaret Armstrong		
Cause of Death		Primary Tuberculosis, Bowels + Lungs	about a year			How long sick	
Death		Immediate Exhaustion				Accident, Suicide, Homicide	

Reported by

Lav. J. Chapman M.D.

Address

Trappe, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

Louis Percival Moore

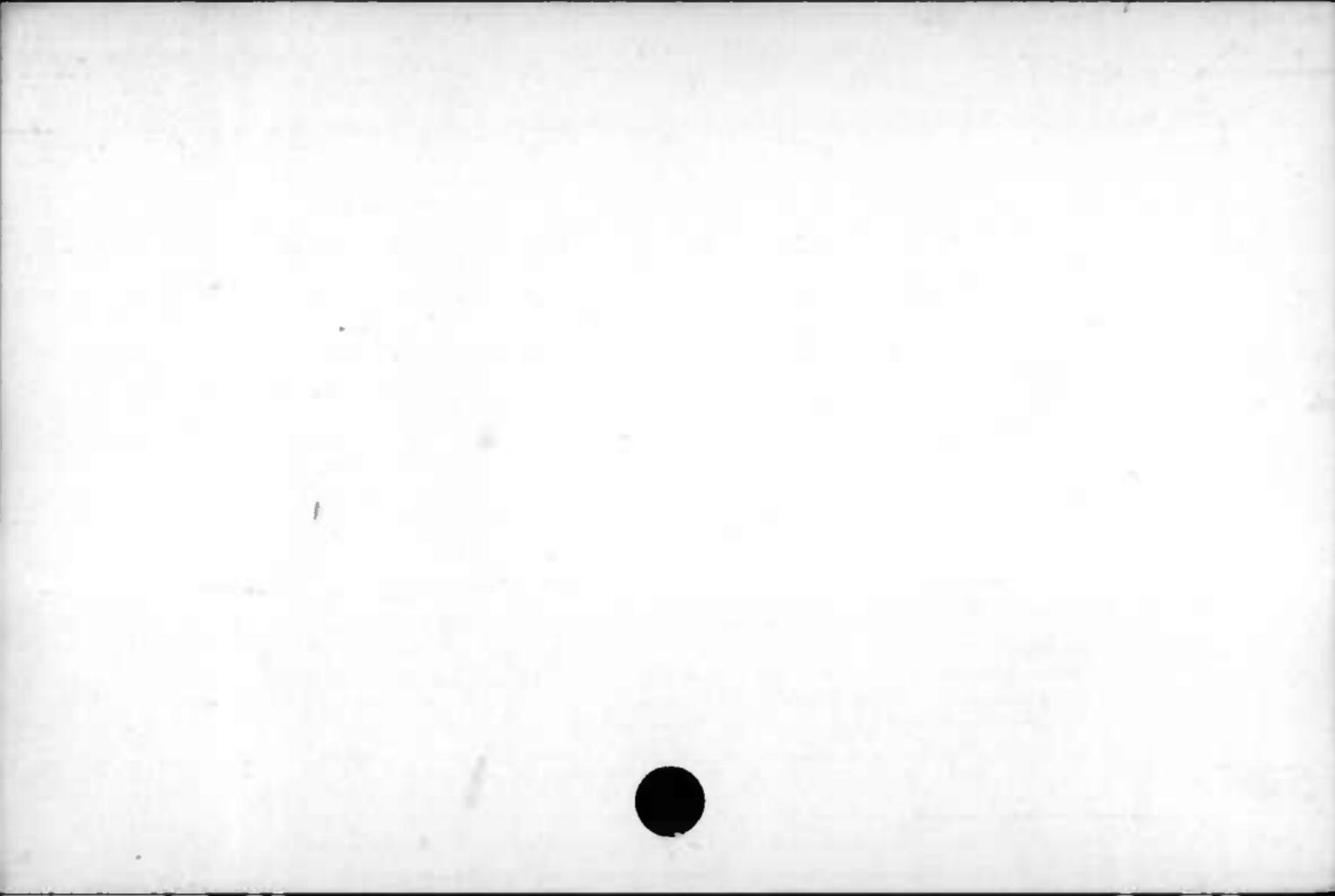
CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died <u>near</u>	Town <u>Grappe</u>	County <u>Talbot</u>	MARYLAND		
Date of death 1903.	Month <u>7</u>	Day <u>13</u>	Age <u>39.</u>	Months <u>7</u>	Days <u>5</u>
Sex <u>Male</u>	Color or Race <u>White</u>	Birth-place <u>Talbot Co. Md.</u>			
Married, Single or Widowed <u>Married.</u>	Occupation <u>Fanner</u>				
Name of Wife or Husband <u>Sarah Ida. Elms.</u>					
Father's Name <u>Jane. Madison. Moore</u>	Father's Birthplace <u>Talbot Co. Md</u>				
Mother's Maiden Name <u>Mahala Ellen White</u>	Mother's Birthplace <u>Talbot Co. Md</u>				
Name of person giving Information <u>Laura B. Malin</u>	How related to deceased <u>Sister</u>				

CAUSES OF DEATH

Primary	<u>Influenza</u>	<u>92</u>	How long	<u>2 weeks</u>
Immediate	<u>Bronch- Pneumonia</u>		How long	<u>2 weeks.</u>
Are the name, age, sex, color, date and place correctly given above?	<u>Yes</u>	Signature of Physician	<u>Joseph A. Ross. M.D.</u>	
		Address	<u>Grappe, Talbot Co, Md.</u>	
Accident or Suicide?				



Name
in
Full

Mary Elizabeth Poole

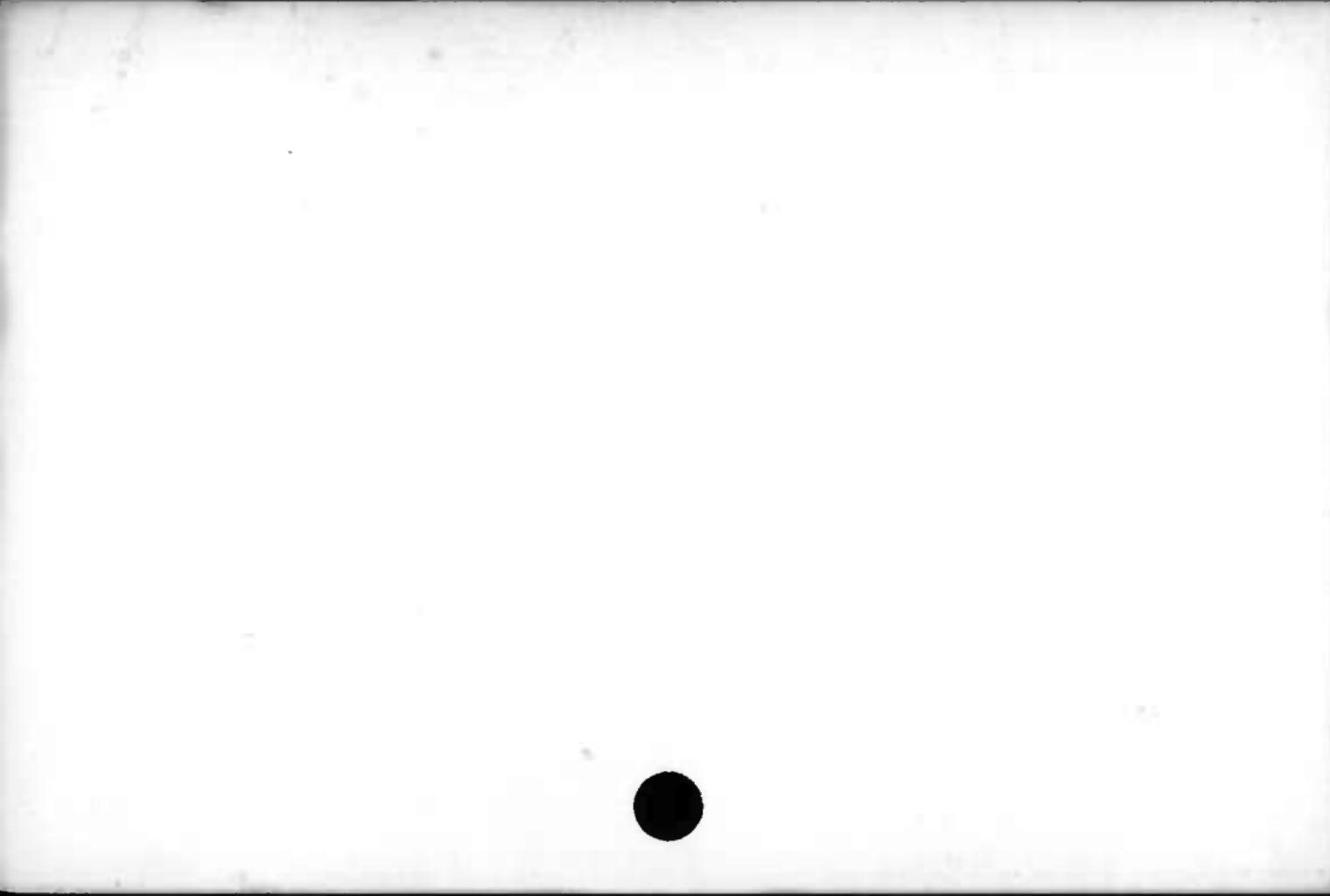
CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND		
Date of death	Month	Day	Years	Months	Days
1903	July	17	Age	47	17
Sex	Female	Color or Race	white	Birth-place	Delaware
Occupation	Where Residing if not at place of death				
Housewife	Easton				
Married, Single or Widowed	Name of Wife or Husband		Jas H Poole		
Father's Name	Parnell Blue wood		Father's Birthplace	Rock.	
Mother's Maiden Name			Mother's Birthplace	Del	
Name of person giving information	Jas H Poole		How related to deceased	Husband	

CAUSES OF DEATH

Primary	Chronic Bronchitis		How long	6 Months
Immediate	Exhaustion		How long	one week
Are the name, age, sex, color, date and place correctly given above?	Yes	Signature of Physician	E. R. Zupke M.D.	
		Address	Easton Md	
Accident or Suicide?				



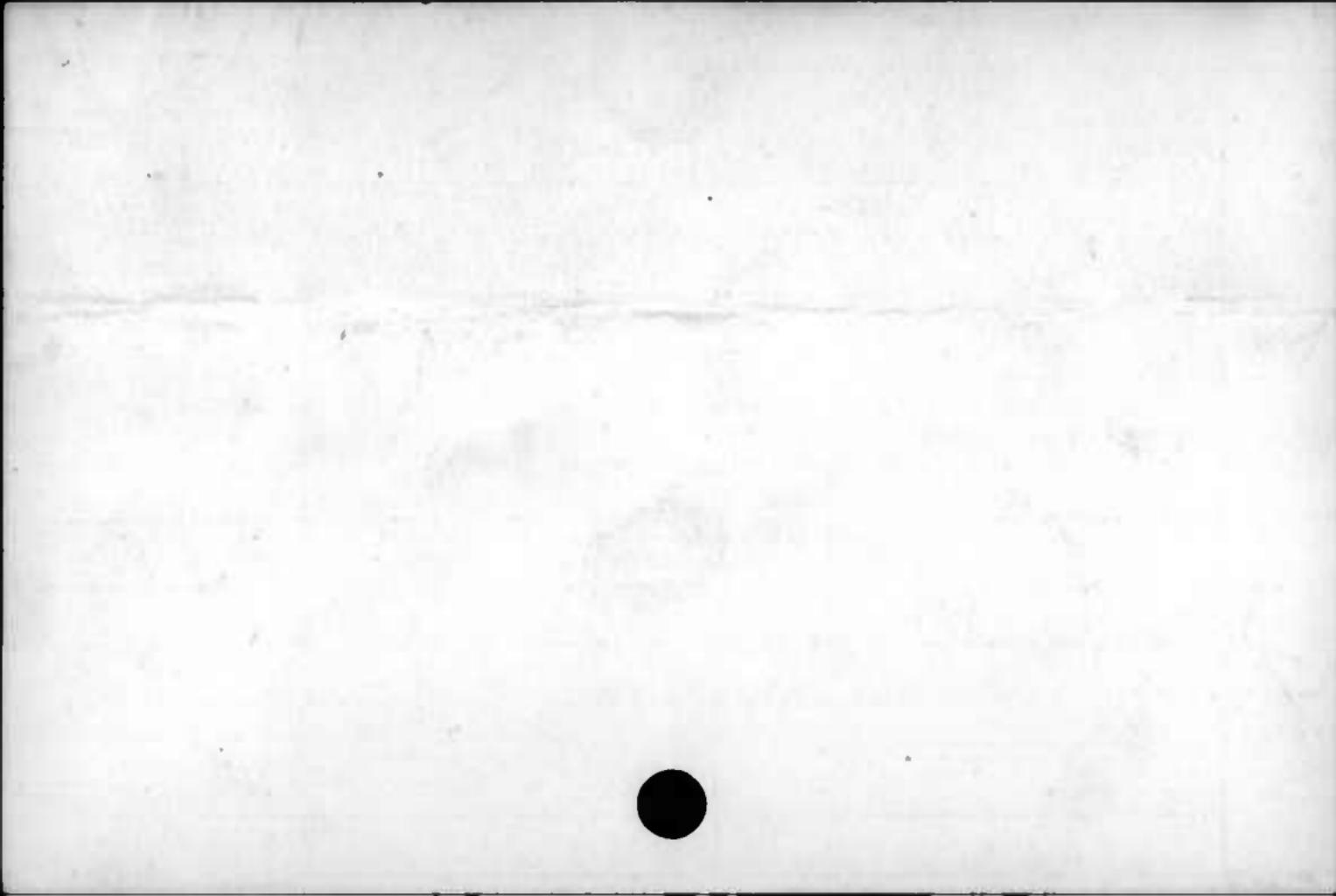
Name
in
Full

TO BE ANSWERED BY
NEAREST FRIEND

Died at <i>Lower Ella Ridgway</i>			County <i>Zelby</i>		MARYLAND		
Date of death 1903	Month <i>July</i>	Day <i>Thursday</i>	Age <i>85</i>	Years <i>85</i>	Months <i>3</i>	Days <i>0</i>	
Sex <i>Female</i>	Color or Race <i>White</i>	Birth-place <i>Zelby</i>					
Married, Sngte or Widowed			Occupation <i>Housewife</i>				
Name of Wife or Husband <i>William Harry</i>							
Father's Name <i>Edward S Colliton</i>			Father's Birthplace <i>—</i>				
Mother's Maiden Name <i>Eliza Porter</i>			Mother's Birthplace <i>—</i>				
Name of person giving information <i>Oliver Ridgway</i>			How related to deceased <i>Son</i>				

CAUSES OF DEATH

PHYSICIAN OR CORONER	Primary <i>Phtisis Pulmonalis</i>	27	How long <i>Five years</i>
	Immediate <i>Drinker</i>		How long <i>Three days</i>
Are the name, age, sex, color, date and place correctly given above?		Signature of Physician Address	
<i>yes</i>		<i>J. A. Stevens</i> <i>Oxford Md.</i>	
Accident or Suicide? <i>No</i>			



Emily Virginia Slaughter.

Town

County

MARYLAND

Died at ~~near Trappe.~~

Talbot

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1903.

July 10

Age 57. 8. 1

Md.

Farm wife.

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

two

Husband

of

Sam'l. M. Slaughter

Wife

Father's

Name Hopkins Huddaway Mother's Maiden Name Pamilia Leaverton.

Cause of

Primary

Bright's Disease

How long sick

about 3 years.

Death

Immediate

Coma.

120

Accident, Suicide, Homicide

Reported by

Rev. S. Chapman M.D.



Trappe, Maryland

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

Tenah Hesley Sow

CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIEND

Died <u>near</u>	Town <u>Easton</u>	County <u>Talbot</u>	MARYLAND		
Date of death <u>1903</u>	Month <u>7</u>	Day <u>9.</u>	Age <u>71</u>	Years <u>—</u>	Months <u>—</u>
Sex <u>Male</u>	Color or Race <u>Negro</u>	Occupation <u>Farmer</u>	Birth-place <u>Talbot Co. Md</u>		
Married, <u>Single</u> <u>or Widowed</u>					
Name of Wife or Husband <u>Eliza Ann Newnam</u>					
Father's Name <u>William Sow</u>	Father's Birthplace <u>—</u>				
Mother's Maiden Name <u>Henrietta Slaughter</u>	Mother's Birthplace <u>Talbot Co.</u>				
Name of person giving information <u>George Irvin Sow</u>	How related to deceased <u>Sow</u>				

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	<u>Tuberculosis of ankle-joint</u>		How long <u>14 weeks</u>
Immediate	<u>Exhaustion</u>		How long <u>—</u>
Are the name, age, sex, color, date and place correctly given above?	Yes.	Signature of Physician <u>33 Joseph A. Rose M.D.</u>	Address <u>Grappe, Talbot Co. Md</u>
Accident or Suicide?			



Name
in
Full

Mary E. Thomas

CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIEND

Died at	St. Michaels	Town	Talbot	County	MARYLAND	
Date of death 1903	July	Month	26	Day	Years	Months
Sex	Female	Color or Race	Colored	Occupation	Birth-place	Days
Married, Single or Widowed	Single	lived				
Name of Wife or Husband						
Father's Name	Wilbur Thomas	Father's Birthplace	St. Michaels			
Mother's Maiden Name	Katie Mitchell	Mother's Birthplace	St. Michaels			
Name of person giving information	Wilbur Thomas	How related to deceased	Father.			

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary

Cholera Infantum.

How long

8 days

Immediate

How long

Are the name, age, sex, color, date and place correctly given above?

Yes

Signature of Physician

Address

Dr. J. B. Sett.

St. Michaels

Ind

Accident or Suicide?



Name
in
Full

Severance M. Thomas

CERTIFICATE OF DEATH

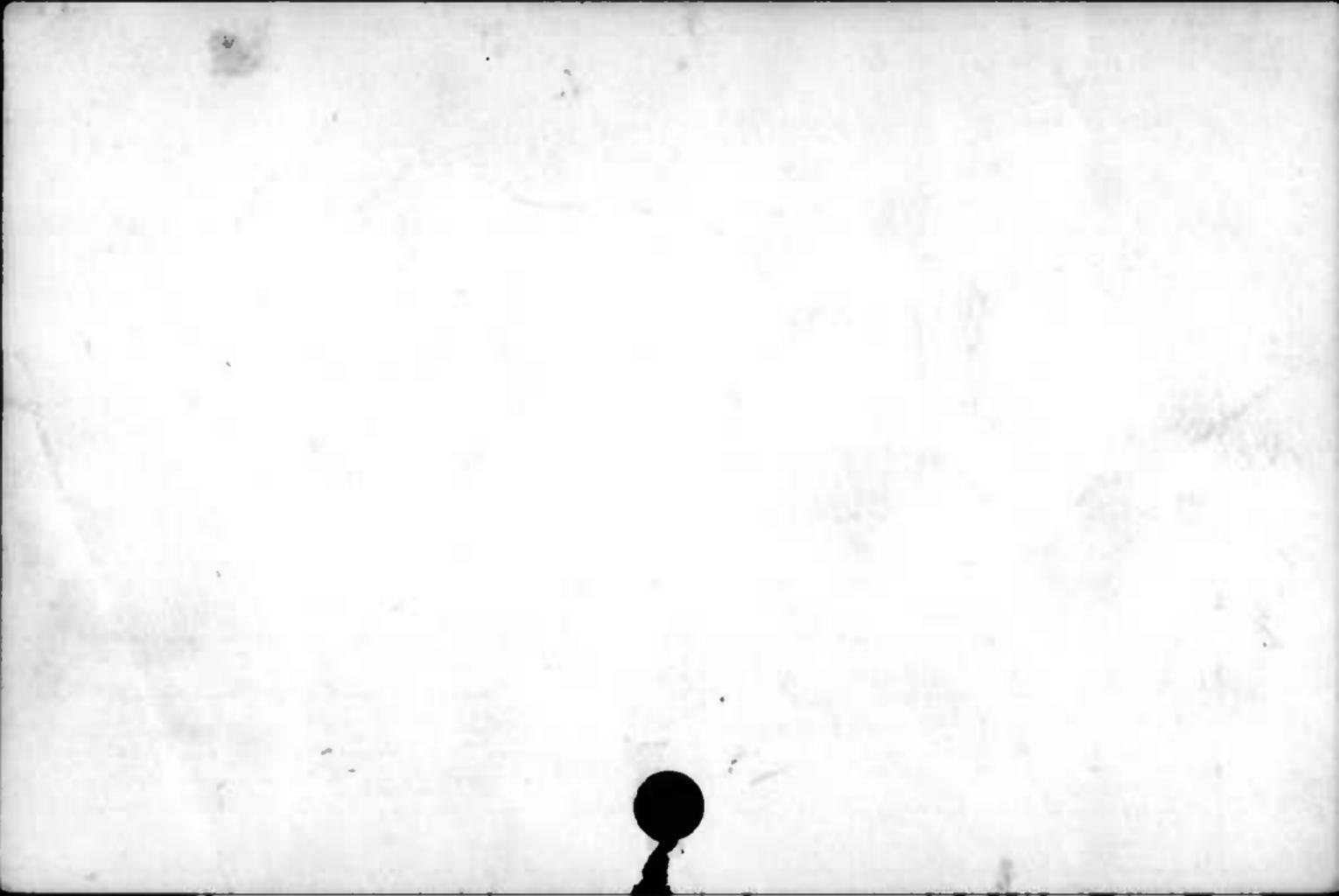
TO BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND		
Died at	Hopkins Neck	Talbot			
Date of death 1903	Month July	Day sat	Years	Months	Days
Sex	Color or Race	Age	Birthplace	Hopkins Neck	
Married, Single or Widowed	Occupation				
Name of Wife or Husband					
Father's Name	Henry Thomas	Father's Birthplace		Talbot Co	
Mother's Maiden Name	Clem Oliver	Mother's Birthplace		Talbot Co	
Name of person giving information	Henry Thomas	How related to deceased		Father	

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	105	How long
Immediate	colera infantum	10 days
Are the name, age, sex, color, date and place correctly given above?	yes	Signature of L. S. Kelner, M.D. Address 11 Cal Oak Talbot Co. Md
Accident or Suicide?		



Walker Harrison Thompson

Town

Easton

County

Talbot

MARYLAND

Died at

Easton

Y.

M.

D.

Native of

Date 1903

Month

Day

Age

Talbot

79. 7. 7

Occupation

Male

White

Age

79. 7. 7

Native of

Male

White

Female

Colored

Age

79. 7. 7

Native of

Married

Talbot

Occupation

Single

Talbot

Danker

Widower

Widower

Divorced

Number of children living

none

Husband

of Susan Ann Mills

Wife

Susan Ann Mills

Father's

Name Geo. F. Thompson

Mother's

Sarah R. Harrison

Maiden Name

Name

Cause of

Primary

Arterio Sclerosis

How long sick

8 years

Death

Immediate

Cardio Dilat.

Accident, Suicide, Homicide

Reported by

Dr Garrison MD

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Ce tificate of Death

Julius A. Tucker

Town

Towson Mills

County

Salisbury

MARYLAND

Died at

Date 1903

Month July

Day 30+

Y.

M.

D.

Native of

Occupation

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

A. R. Tucker

Mother's

Maiden Name

Alice Gray

Cause of

Primary

Cystitis - Colitis

105

How long sick

4 weeks

Death

Immediate

Convulsions

Accident, Suicide, Homicide

Reported by

Julius A. Johnson M.D.

Easton Md

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

